

Dr. McClellan

Inflammation

- We always find Inflammation in One of the three stages,
- 1st - Adhesive, which is the most favourable, and known by the itching and no fever. Should this go further, we have
 - 2nd - Suppurative, known by the severe throbbing pain, and the constitution is considerably affected, pus (which is a peculiar matter) fluid emitted from the blood vessels of a straw yellow colour full of globules, if the emission be weak we have a serous fluid if strong a dark blood-like fluid thrown out. And then
 - 3rd - The Ulcerative stage —

Inflammation terminates by Resolution, Suppuration & Gangrene
 The best to treat it by Poultries, blisters, purging, low diet, ^{phlegm pills} ~~but~~ rather stimulate if you wish suppuration to come on
 Monday 14th Nov - 1825

Scrofulous Abscesses to be opened, carrying the lancet some way under the skin and little to be evacuated at a time, not allow the abscess to be exposed to the air; but poultice Abscess of the thigh known by the fluctuation of pus, open poultice the opening over a wet bandage
 Tuesday 15th

It is probable that all abscesses that open into the abdomen always open by sloughing or a species of mortification and not by suppuration.

The next kind of Abscess are blood Abscesses to be treated as before. The Abscess that occurs on the head of new born infants which sometimes produces a caries of the bone or dura mater to be treated by dissection or as before mentioned in other abscesses. Not to be confounded with Hernia Cerebri.

Sub-cutaneous Abscesses after continued scrofulous treated as above. Whitlow abscess of the hand &c the hand to be kept at rest as above - also known by the bulky appearance of the back of the hand.

Thursday 17th

Mamillary Abscesses apply emollient fomentations, and not the cold applications, blood letting generally, saline purgatives, keep the breast elevated and lie on the opposite side - Terminates by Resolution or Suppuration to be opened in the most pending situation as above, then poultice &c. If Fistula cannot perhaps by frequent irritation of an abscess, sternal cautery are to be applied, a corrosive subl. for 3 or 4 to 10 times or Sulph. Zinc or Cuprum or setons to be passed through the opening and stimulants introduced &c. or sinuses also of abscesses require counter opening and require pressure and some stimulant or apply introduce a silver probe immersed in Nitric acid - Anthrax or Carbuncles known by great pain of a burning kind - Treated by Antiseptics -

Phlegmonous, Abscesses

D. M. O'Blair Thursday 17th

2

Anthrax always to be treated according to circumstances. And should it be necessary treat as in Erysipelas.

Friday 18

Erysipalis a cutaneous inflammation confined to tissue of the skin, the remedia, to be directed to Stomach, 1st An. Emetic or Fast Ant. Treated locally by Ointment or powder of different kinds and kept moderately cool. — The Phlegmonous Erysipalis, with fever more considerable and the skin thickened, the worse course have been contained the fluid to evacuate — The Constitutional treatment the most important, by the Antiphlogistic treatment. — The exact the greatest advantage — depletion to be practiced. — Poulices, may do good in some cases. Watery solution ^{of opium} with lead or Fresh Lead, sometimes very useful. — the strong mucous Ant. Erysipelas part — the Corrosive Sublimate sometimes useful. — Edematous Erysipelas common to enfeebled constitutions, any inflammation may substance may produce gangrene, not debilitate the constitution.

Monday 21st

Mortification of Dry or Chronic Ulcers, Scabs or moist. — Of the result of Inflammation — And those which are not connected with inflammation. — Of that which originate of Inflammation and it does sometimes originate from a healthy inflammation — Cause by too much stimulation from the inflammation — to be treated by lowering the action but not much to be done unless soothing pain and hastening Sloughing ~~but~~ by which the living parts take on the action of suppuration. And Ulceration but not frequent. — Theumiculus, and Anthrax always terminate in Mortification. — Erysipelas not often — Local constitutional irritability are favourable to Mortification. — Sometimes occurs Constitutionally And other times locally And this is always favourable if proper treatment be applied, not an Antiphlog. And stimulating Antispasmodics as wine whey, Rhenish Egg &c. And fermenting poultices Yeast. Rye flour and Honey sometimes a little warm water — sometimes little Spt Wine or Opium to be added (either the bark or Charcoal poultice) the above to every kind of Mortification. — Burns And Cold sometimes induce this kind of Mortification especially the natural temperature be too high, induced, neither induce the circulation in the part to soon. Spt Camphor and Heartshorn to burns and of Turpentine. — Those that do not result from inflammation as pressure or ligature or amputation of an artery in old age — two just of the same kind, in this no pain to be known by discoloration of the part and not warming the natural color soon after removing the pressure &c in those cases prevent pressure in those parts, apply the Spt Mindereri — Sweet Camphor or Heartshorn a whole apply an adhesive plaster — from ligature, this seldom ending health, constitutional but in some cases.

More of a paper articles than is the chance of curing - Dr. W. C. Allen
such as Potts' Modification of the toes &c, depend on an imperfect Circulation
caused by supporting the system some say by Opium alone or combined with Must
Camphor, Volatile oil of ^{Opium} in a solid form - Locally apply noli-stien
and apply very little - Little to be done in Constitutional modification
perhaps induced by Bone Cornuter used in Rye bread

Wednesday 22nd

Of Scrofula, The predisposition, are the complexion, eyes &c. But
a relaxed state of the solids is the cause of Scrofula - the want of
tone, also - they are unable to bear so much labour or fatigue, the
cellular tissue also is very relaxed and easy produce discoloura-
tion from a slight blow &c - " Some also suppose the fluid
likewise to be deficient in their Constitution - Scrofula; Heredi-
tary and Acquired - Bringing up children in an impoverished &
dirty manner and keeping the children very low - will induce the
disease - And debilitate cellular tissue and the Digestive organ, it
does not belong to the Lymphatics as some say - but the Solids and fluids
Diet. Parnaceous diet - no hot bread - no shortening - arrow root, Sago &c
Milk &c - laxatives not purgatives - Blue pill 4 to 5 grs combined
1 or 2 grs Ipecac as an attenuant occasionally a laxative, of Rhei
et Magnesia, Cal - Or Senna & Manna it, borroway seed - also the
aloes with apecetida &c

Local symptoms is first manifested in the Glands - often in the
bone - fibre, ligament tendon &c It first commences in the Mesenteric
glands, known by enlargement &c - The redness in the commencement is
not inflammation - the inside of a cheese - like substance, and
then a cold-like abscess - To be distinguished from Worms but the
treatment much the same. but do not -
Scrofula of the Lymphatic Glands not peculiar to this system;
no inflammation at first, but afterwards inflammation from pressure or other
causes, the system becomes irritated and sometimes protracts, Heelie
ferr - Curded like matter floating in fluids not always present -
Treatment, Constitutional treatment as above, not punctures only when
there is inflammation, generally, stimulating plaster or fermentations
are to be applied - " - Thursday -

They occur, under the peritoneal surface of the thorax and abdo-
men; then may be Constitutional Scrofula and never develop itself
for a whole life or result in Consumption - Tumors become
abscesses in the lungs or cavity of the bronchia and is thrown up by
expectoration, sometimes they close and do not affect the Constitu-
tion but not by granulation, but by ligamentous substance or abscess
or sinuses and causes the cough which often last for life; to be treated
as in Scrofula Ectetic - this causes Empyema perhaps &c
Scrofula in the Serous and Synovial membranes, should the
matter be evacuated by the use of the lancet

Scrophulous Morbidity; what is called White Swelling is
often Scrophulous, but not to be confounded with the inflammation
Treated occasionally alterative purges, not much blood letting
unless few Cases according to inflammation.

Scrophulous of the bones, generally all affected more or less, and be-
come less solid and cause distortion &c — of the spine & limbs
And to be treated as such — no depletion — generally, as above
alterative, give tone to the system &c —

Friday
When no caries or inflammation attends; but distortion of bones
do not confine the patient by stays &c and

When there is Caries of any bone, confine the patient &c
to remove the inflammatory action & cure the Ulceration or do it Chemically
Apply some dilute Nitric Acid &c — it affects the eyes and
every other portion of the body — Treated by Constitutional alteratives.

When Hectic Fever takes place from Scrophulous, seldom takes place
before the Abscess different opinion whether before or afterwards, re-
sults from irritation from inflammation, different kinds in different causes.

2 Kinds, one of Scrophulous known by well marked prostration Diarrhea
at the end and copious night sweats — Of other inflammation not
so ^{pure} ~~pure~~ ^{not the same} to him of Antiphlogistic Treatment will be borne
in the Scrophulous kind — Patients in Scrophulous Hectic seldom think
them selves so ill as they really are — Treatment in the very
commencement by Proper Nutritious diet as much as he can digest.
State of the System to govern the exercise — free sleep of air when the fever
shall be subdued, no disease require so much change of clothes.

Few Medicines can be of use Antimonials to be given small quanti-
ties as one grain 3 or 4 times a day in a pint of water to be drunk in
intermittent occasionally as an alterative not to have any immediate
symptom or effect if so lay it aside — I never be satisfied with relief
in the disease — The flesh of ^{young} animals to be avoided choose
the white meats &c —

Local remedies best used hot iron
in Scrophulous of the joints and bones — Next the Moxcha of the French —
must Issue or Sitor —

Poultices to keep up the discharge and
cleanliness — no relief from internal remedies unless they be
alteratives — Alteratives are Gold Mercury, Arsenic, Silver &c — & the
quack medicines act by their alterative effects.

Dr. McClellan

Monday, Nov 28th

Of the Curved Spine, which of different kind—1st Curved Spine, 2nd Caries of the Spine where we always have Hectic fever and the distortion always confined to one place, different in the Curved Spine where there is a displacement of a great number of the Vertebrae, Curved is known by there being no pain, but much pain in case of Caries, and always it may be known by this—In the Curved sometimes you have a tiresome pain somewhat peculiar to this Curved Species—And almost always common to the female as a chronic disease. The Curved Spine caused by bad Diet—confinement &c often it does not effect the general health—Treated as before by the mild laxatives—Alteratives, gentle exercise—Tonics, the Scrophulous Diet in proportion to the state of the digestive organs &c. Position of the body, no confinement, or Machinery to be used—Exercise, nearly as possible in the erect Position to move about as great a length of time as possible, and lie down a short time several times a day merely to refresh themselves, horseback, carriage riding, And any exercise that will ^{bring} the body most into action is best—When it is of long standing no cure—Only when it is recent and owing to an affection of the general system, and this done by giving tone to the muscles, and using friction of Salt on a towel, this the patient to do herself—

Of the Caries Spine or broken back, caused by a chronic kind of inflammation, perhaps always from Scrophula, Scrophulous and always evacuated at some time or other from the Ulcers attending, Hectic fever always occurs when the abscess is opened and sometimes even before this is the case, but not all cases of Caries of the Spine are attended by Hectic fever and these are the only cases that may be cured—Treated in addition to the general treatment the local one is—1st Rest in the recumbent ^{posture} this however only in cases of Caries—2nd Relieve the chronic inflammation by cups to be repeated as often as pain returns after relieving pain simply by issues either caustic or the cautery, or perhaps best Moxeas or cautery this best where you cannot possibly remove inflammation—

Scrofula of the Joints or White Swelling, also of Necrosis
may be mistaken for Rheumatism. Treated generally as before
if it be the joint then must be set by using a splint - also
by alteratives after Cuppings, And all Treatment as before
or as in Scrofula generally. —

Yesterday Nov 29th

Syphilis, divided into, Tree or Hunter, or Mercury most successful
in this — This of different Symptom Primary & Secondary. Primary
Symptoms affects some part of genital or even other place, this Sym-
ptom is an Ulcer — of two kind the One on the Glans Penis, ^{or on the inside of the prepuce} peculiar
an account of its hardness, and surrounded by induration, where there
is not much inflammation — not painful & no discharge —

When the indolent appearance goes away we may expect something
favourable And this is the only true Chancre —

When the Ulcer be on the lip it is ^{the same} ~~different~~ — And unhealthy
discharges of pus, when the part the same on the Scrotum — And discharges
of pus —

Next to these Ulcers we have Bubo, in the Lym-
phatics; Caused by Lymphathy or by the fluids, being in the course of the
Vessels from the Chancre — One Gland only swells in the true
Ulcer or will be cured by Mercury — it is an indolent disease —

Bubo of true Syphilis has a dull aching pain and constant
the Gland increases constantly untill it breaks —

Of the Secondary Symptoms, are an Ulcer in the throat, blotches on
the skin of a Copper Colour these are the first order — The Secan-
dary Order are the Affection of the bones, along the shaft of some
one of the long bones under the Percostium the occur in
the form of Tumors, sometimes affect the bones of the head &
never the joints — There are Cancer Nodes —

Treatment different in the different symptoms — Primary Chancre
1st By light topical cleansing plan, Mercury, in small quantities not
to effect the system — but the best to remove the existing symptoms, some
alterative in small quantities and other large — When there no Scrofula
and no irritation of the system give ℞ grs of Calomel 3 or 4 times at bed
time And you have a large secretion of every part of the system. Mer-
cury Act. upon the Capillaries & Nerves and induces ^{day} different condi-
tion of the system — Washing the part 3 or 4 times ^{day} & cover it by a
plaster of Common Beate, if it does well continue the mercury —
avoid Cold or Cold Water &c The alterative course to be pursued
in feeble or Scrofulous persons by grs 11 or 15 Calomel with antimony as before
with a wash of Sulphur Zinc and do not produce inflammation or Cancer

Not always necessary to use Mercury but may be taken by the Knife
or Caustic in small Chancre only, use local Applications to
remove the Chancre.

For the true Bubo Mercury by friction not so far as produce
salivation, it will be of service in 3 or 4 times — If Friction
will not do we depend upon internal affects by Mercury taken
to purge — The limb to be kept at rest and the gland not
too irritated — If much pain, Leech, then a Blister to
be applied, after this a camphorated plaster — If Suppuration
has commenced we may do well by this treatment but must
be opened by a large and free incision —

Treatment of Secondary symptoms, very easily done by Mercury
if it be a true Venereal Ulcer; and no inflammation in this ulcer
with a white pulpy surface, no pain in swallowing in this
ulcer — The discharges large, oblong, discoloured deeply, and
finally ulcerate — The Use of Sarsaparilla given with blue pill
of which 3 or 4 grs daily, free drinks of different teas — A fac-
tious Diet — generally cured in 2 weeks that is the last
symptom — Discrimination the grand part

Of the Bones cured slowly and only by a chronic course of
by Mercury in small doses of Corrosive subl. with ^{some cicuta} narcotic extract
affection of the bones, known by the nocturnal pain, it may not
always happen 2000s powder at bed time Corrosive subl. 9gr
Cicuta gr iij three or four times a day — with plenty of drink
to keep up a constant insensible diaphoresis, sometime,
we must cover the Nodes by blisters and relieve nocturnal
pains

Thursday Dec 1st

Syphilis, the secondary symptoms are as liable to happen to the Antemastoid
the true Syphilis

Syphilis of the Antem kind called by Larmichet the Scaly Syphilis

The Pustular Venereal Disease is the kind where the secondary sym-

ptoms are of a Pustular kind — The primary symptoms are ulcers
in same situation as the true kind but of different from chancre
because they are soft instead of induration of their base and ~~the~~
the edges not elevated — These ulcers are more irritable than
chancre or are more sore, inflammation more common to this than
to the chancre you may sometimes have common ulcers and then
no constitutional affections —

Bubo more likely to occur in this than the true kind and
are perhaps symptomatic of the ulcer, the Bubo not confined
to one gland only sometimes on one side or on both

May suppurate or be disced - they break out in about the same time as before - The throat and skin break out in sores but instead of the copper colour colour, we have small pustules or biles, the throat sore and a difficulty of swallowing contrary to the true Syphilis

Last order of symptoms are no nodes no nocturnal pains, they affect the Periosteum and not the bone, as before, the Constitutional affections not so severe, if no remedies used the disease would probable terminate favourable in 2 or 3 months and therefore a very mild disease and do not use too severe remedies. Mercury not to be used in this disease, at least very rarely. It may be cured without Mercury -

Treatment, the primary ulcers to be cured by local remedies, perhaps bleed and cleanse the alimentary - If we doubt the kind of the disease use the yellow or Black Lark - the best Sulph of Copper 5-10 to 15 gr to ℥j or Sulph Zinc not to be used while there is inflammation not induce it by their use, use them once a day - When the ulcer cannot be covered by the prepice we must use some plaster or salve, use not irritating plaster where there is inflammation use common Cerate, if no inflammation the red Precip of Bubo to be treated as common glandular affection Mercury, if used but may do harm occasionally may do good, patient to be kept at rest, use leeches, blood letting, and daily purgatives, not to sit up but confined to his back, do not use Blister until the inflammation shall have been subdued - always keep on a large Poultice and may be disced in 4 or 5 weeks, the matter from a Bubo is very innocent and not poisonous -

Secondary symptoms cured easily by some Antimonials and Sarsaparilla attending to Diet. Clothing &c to keep up a gentle diaphoresis will generally be all that is required

An affection of the bones to be cured by depletion &c generally of a Rheumatic kind of pain &c

The Pappillary Venereal disease - known by a discharge from the penis or as it is called Gonorrhoea we have in this disease secondary symptoms similar to those before secondary symptoms as the last - no ulcer ^{in the throat} but inflammation - the secondary to be treated as before cure the sore on the ulcer by washing with soap and water no deeping - The discharge uncertain how soon may be cured

Dr W. C. Cullen

Friday Dec 2^d

Gonorrhea such as break out in a day or two after exposure we may expect a tolerable easy cure - but when it shall not break out before 4 or 5 weeks do not expect a cure too soon - The matter of this disease is infectious - The Gonorrhea virulenta when it commences goes on rapidly, but the simple Gonorrhea goes on more slowly -

Gonorrhea virulenta infectious in this way, as horns, in the early stages the ^{same} may be said of Copaira and other stimulants.

Treatment, for the first 8 or 10 day use simple remedies and cleanse the bowels, by this time you will know of what kind it is - If it be gonorrhea virulenta local remedies of no use at all - When the glands in the Urethra shall enlarge you may know it to be virulenta - In both cases ~~always~~ bleed and reduce inflammation by cold water & the ~~penis~~ penis kept erect - give laxatives, mucilaginous diet and drink of a simple kind you have nearly cured the disease - but on the contrary if of the virulenta - In simple enjoin rest, abstinence of animal food no stimulants, laxatives, these are sufficient until the latter end of the disease -

Of the simple kind, treatment, ^{are by} ~~of the~~ ^{stimulants} ~~stimulants~~ ^{diuretics} ~~stimulants~~ - the injections perhaps the best, of an slight antiseptic kind the very best - the sugar of Lead very infectious as an injection unless 5 or 6 grs of this with the same quantity of Sulph of Zinc to an ounce - the next best is the Sulph of Zinc 2 or 3 grs to an ounce ~~at first~~ at first and increase to perhaps 10 or 12 - the Sulph Copper very good but must be much weaker - Oil of Vitriol very good after inflammation One drop to an Ounce of water, after trying the above, sometimes injections do not answer and then diuretics As Bals. Copaira either pure or in Combination if pure 20 or 30 drops 3 times a day - Continue the injections or diuretics after the disease appears to be stopped - You may use the Bals. of Canada or Spt Turpentine - you may also use common Rosin - Also direct the patient to wash some time after you discharge him -

In Gonorrhoea virulenta, first check inflammation before you venture to treat for the last stage, if it should be 5 or 6 weeks from the commencement and after this is accomplished - you may treat as in the simple Gonorrhoea, mentioned before &c but if you treat too soon with Emetics &c you may produce a troublesome gleet &c -

Hernia Umbilicalis or testicles enlarged may come from cold if the swelling be in Gonorrhoea, use rest, blood letting by leeches, elevate the scrotum - Emollient fomentations or poultices to reduce pain and swelling and generally cures it in a few days -

Costiveness do not require severe Cathartics in the last stage, but light laxatives, as Magnesia the very best in all diseases of the organs -

Enlarged Glands under the Urethra often ~~suppurate~~ suppurate in Gonorrhoea virulenta you must use Mercury largely, sometimes there will be an opening into the Urethra by which the Urine passes out &c - Locally apply Mercury - at the same time a large blister

Monday Dec 5th

Phagedenics, the symptoms of two kinds, the ^{secondary} ~~secondary~~ do not invariably occur with a bubo involving, the worst kind and most fatal, begins in various, the worst begins in a sloughing Ulcer - sometimes by a slow Phagedenic Ulcer and is very liable to be mistaken for Syphilis of a different kind - the generally affect the Surface Mucous - of 3 kinds of progress, the last kind appears as if it was eating at one end and progressing at the other end of the Ulcer - the first ^{or sloughing} begins small and extends very fast whether in the glands penis or prepuce, and destroys it - 1st reduce the symptoms of inflammation by bleeding, parts kept cold, bowels evacuated - Next apply the undiluted Nitric Acid or some active caustic and check mortification, surround the edge of the Ulcer by lincilicon Ointment, with a piece of lint immersed in Nitric Acid and apply it carefully - after wards apply a poultice

The same mode may be pursued in the other two kinds of this disease, as before reduce first inflammation by Antiphlogistics and afterwards apply the Nitric acid and you generally have a cure in the

first symptoms, Of the Secondary symptoms, bubo in Sexual Gland,
treated as before, the tobacco ointment also to be used with the best
effects in the bubo — Mercury may be used in some circumstances —
Secondary form-1, the throat the first affected skin bones affluence
does not often happen in the throat if it does occur may do good by blister
and mercuria and as before — The formation of Mercury for the affection
of the skin and throat — Skin affected in the form of tubercles or blotch
and break out and increase sometimes we have Phagedenic
ulcers after the tubercles with a long train of Anomalous symptoms,
with the affection of the bones and the periosteum is enlarged, the bone
likely to become Carious treated by $\frac{1}{5}$ gr of Muriate of Gold with 203 gr
of bicinta 3 times a day, ulcer by a poultice of Carot — kept a rest &c
with burning the Phagedenic ulcer &c

Tuesday Dec 6th

Anomalous diseases of the head eye, nose &c many months or years
after Syphilis, no one medicine can be considered as specific —
Soluble Solution for thickening of the membrane of the nose — e Arse-
nic good generally in these anomalous appearances also the Sars
aparilla, with grs corrosive sublimate to a pint of Sarsaparilla &c
wine glass full 3 times a day &c

Thursday Dec 8th

Of Wounds of Lacerated - Contused and Gun shot - Incised, punc-
tured — Incised wound. ^{by a part} by division by a sharp instrument and easily heal-
Lacerated next easy to cure and treated as incised — Contused, bruised dif-
ficult require suppuration before healing ^{became by bone vitality} — Puncture generally produce
deep seated inflammation and an abscess is formed, constitutional ir-
ritation very apt to occur of the nerves and cellular tissue and allow air into
them — Gun shot wound often have foreign bodies lodged in them —
also much sloughing from the parietes of the coat of the ball — Union
the first intention by Mr Hunter, done by adhesive inflammation &c (W. G. Lellan)
needles to be used in wounds of the face w^h lies &c, strips to be used as may
be best &c On the art of dressing incised wounds, in stitching begin the angles
and not too tight — and with the interrupted suture — not cover the suture
by the strips — Treat lacerated wounds as incised or else by parities
contused by parities

Friday Dec 9th

Punctured Wounds, always very like to occur from this kind of wounds to avoid this discuss the tumour no incision required immediately - Tetanus apt to ensue from slight punctures not deep seated one - The danger is the cellular tissue exposed and therefore cauterise the punctured part - as lunar cauter - After punctured wounds purgative remove inflammation if of an Tetanic kind Treat by Stimulants and purgatives daily asenna & Manna & Stimulants - Camphorated Wine &c -

In deep seated punctures apply lead water with Poultices enjoin Rest with Antiphlogistics - When foreign bodies are carried in, then will be an abscess
Gum Shot Wounds - no dilatation required - balls &c will generally be sloughed off by poultices and by other general principles, by bleeding, purging, discutients, unless it be in some vital part

Monday Dec 12th

Wounds of the head, generally lacerated, treated as incised or as lacerated wounds of the other parts, remove all hair from the interior of the wound, not often require poultice - if the bone be chipped smooth it off or take it away.

Contused wounds require shaving the hair and suppuration - poultices and heal by granulations - If Arteries are divided does not generally require ligation
Wounds of the eye Lids, require sutures of fine kind

Wounds of the throat - do as on other parts of the body by closing &c or by keeping the head very much flexed by a bandage, or a ditch through the common integuments only, with bandages as may be required - if the Pharynx is divided introduce a tube

Wounds of the Chest - Treat on general principles - but to be closed as soon as possible
Tuesday

Wounds of the JointsThursday Dec 15th

Surgical Wounds of the head - Often cause inflammation of the brain &c either by some tissue as nerve or by Contiguous inflammation - be guarded of your Prognosis

Of Fractures of the bone, now, Trephine unless the brain is injured, known by Compression - Cut away the hair examining the wound by exposing the surface of the bone not cutting too much of the Pericranium - Only as far as

the bone is injured, then where you intend to apply the Trephine remove the pericranium and make a hole in the sound bone to be able to introduce the elevator and thereby remove the fractured part of the bone which may often be done without any Trephining - The Trephine should extend as little over the fracture as possible - the Lenticular of no use - not always necessary to remove all the fractured parts where they may live

Dr. McCallan Dec 16th

Superior of Cholesterin Concussion of the Brain or as some say a contusion.

The simple Head, when there is only a dizziness and no future bad results happen.

The more severe kinds, require great care; the pupil of the eye stationary, muscular system inactive, pulse very weak, ^{quick} slow and tense, until reaction take place — unless compression take place — occasionally, compression take place immediately after the symptoms of concussion and often difficult to decide which it may be — but compression known by enlarged pupil and immovable pupil loose their action and easy — pulse voluminous, slow, distinct of 40 Min or as a man dead. Arise, — indeed often confounded with intoxication, here you had ^{for concussion} better wait a while — consequences from concussion inflammation of the brain or some

Treatment — bleed and do not allow the pulse to rise above the common standard or even not so high, cold applications, head raised, ^{by cold vinegar} and at last — purging &c, if compression appears to come on, bleed largely, not allow him to be moved, leeching, cupping, purging &c. Monday Dec 20th

Compression ^{caused} by a rupture of some large vessel; known by the symptoms not coming on for some time after the effect of concussion, and

1st Where some of the fine vessels between bone and the Arachnoid Mater or the plates

2nd between the membranes and 3rd in the substance of the brain.

Relief only can be afforded from the first of these causes — known by

the symptoms of compression come on some time after concussion, the

locality of the collected blood is known by a great swelling of the place

and the peri cranium detached over the part — and if the tapping up

the peri cranium is does not bleed — but all these symptoms do not often

happen at the same time — Compression sometimes takes place from

collections of matter come on by Canyons and listerises and throwing

bad comprehensions to be Treated by Antiphlogistics if it can be borne

as they are often of a Typhoid nature — depend more on external ^{irritations} applications

by Cupping — Leeching — perhaps Caustics or Moxa very good by exciting

suppuration externally — no relief from an operation only when after

cutting away the scalp you find the bone black and cut away the diseased

bone — Of a Fungus growth from a blow, generally shooting out from

the Arachnoid Mater when there had been no fracture or when there have been

and have been Trephined or elevated, different opinions for the causes

Painful affection of some part of body Wednesday Dec 21st
Shooting pains from one part to another.

Hemicrania a common headache, not however the same as from derangement of the stomach &c but from different causes derangement of the hepatic system or derangement of the nervous system as a Rheumatic sometimes come on as cold or a warm spot on the head - Treated generally, purge and by nervous remedies narcotic &c

Those resembling Rheumatism or even complicated with both of the same kind and caused by cold, accompanied by heat and fever inflammation - &c

Neuralgia of the shooting kind, Lic Dolereus or by the very worst form of

this disease and having complete intermissions - arising from various causes as primary diseases of the brain and here the eye is spasmodic and vision often affected and the mind is affected pain in other parts sometimes ear, tongue &c - Next to wait until a see if the brain is affected - Remedies to be directed to the brain as bleeding purging, local applications only to palliate if it be in the brain generally die by convulsions - these diseases often complicated with Hemicrania &c &c

the next form is when it depends on an inflammation of the nerves and to be hardened - caused by wounds, rheumatism, accompanied by great pain to the touch, sometimes great swelling of the part - generally only a redness, pyrexia of muscles of the part to which the nerves go, being irritable and rigid - great pain in coughing and sneezing - Requires the Antiphlogistic remedies other remedies do injuries - Cups and Leeches with ~~bleeding~~ bleeding very low diet - Blister plentiful &c No much harm - After you subdue inflammation you may treat as may be required &c - Take care that this practice is not applied any other form of disease -

There is another form when there is no inflammation, being a derangement of the nervous system, known by the state of the system, pulse generally weak, gapen, or soap bubble and will not beat pulse on the artery - the part is not internally painful - cold, diminished sensibility, the intermission between the paroxysm are very complete - Narcotics, Nervine treatment the best with Inducies - as Stramonium and Belladonna - Treatment first correct the state of system, then such remedies as act on the nervous system viz Ext. of Belladonna and Stramonium of the leaves gr $\frac{1}{4}$ repeated 3 or 4 hours, Belladonna larger grs sometimes larger up to 30 grs with Calomel as generally prescribed Calomel gr ij to 5 - Ext. Bellad. gr ij - Discontinue the remedy when the gums become affected - Some resort to other tonics, as bark & Iron &c or Quinine - The true oxide of Iron should be fine heavy powders - that which we get in the shops is very impure, Pure bark of Mal. Stone 20 or 30 grs &c

Wednesday Dec 21st

A diseased tooth may cause Neuralgia, this does not so often happen as has been supposed - generally the lining of the tooth is inflamed and has been painful a long time before the neuralgic pain - if it be the tooth it must be extracted - also

Foreign Bodies, ^{lodged} in the neighbourhood of the nerve; as shot for instance & litons
Great by Extracting the shot if this cannot be - bleed apply Moxa, and cause suppuration and thereby you will often relieve the irritation -
May also be caused by the pieces of necrosed bones - and different others &c.

Thursday Dec 22nd

The Operation for dividing the nerves, may be but of little use as the pain will generally return and only to be done in extreme cases, if it is done we ought to have a drain, - the branches of the fifth pair -
Neuralgia often complicated with variety of different effects - as Hemiplegia &c and therefore cannot be classed Nosologically -

Friday Dec 23rd

The Moxa for applying it, roll up the cotton in a long roll covered by linen so that a considerable quantity may be in a small space and sticked, this applied to the part by a pair of small forceps and fire set too it. the point of the Moxa is increased by the common blow pipe - Some impregnate the Cotton by Nitre and here you will require a rag or paper with a hole cut through it and surround it so that the heat and sparks are confined to the part - the cotton is better when baked in a stove at least to a tinder - It is said besides, the Caloric that evolved from the Moxa, electricity as is given to the nerves which sometimes is of importance, for this purpose it should be applied over the nerve it not over the nerve may be of use on the principle of Counter irritation - Aqua Ammonia to be used to relieve excessive pain but unless pain from the Moxa is very great the Aqua Ammonia is not to be used, as after this suppuration will not follow so readily, the end of the Moxa not against the skin is to light, but blow it through with the blow pipe - To be used in Deafness, Hemiplegia, Neuralgia &c but it does not allay pain of inflammation of the nerves - to be used on the same principle as the red hot iron - It may be useful to all the organs of sense -

Diseases of the Ear, are very numerous, and very little attended too because we do not understand the principle of hearing - for sometimes the Tympanum and bones are destroyed by ulceration and still there is hearing - the only one now believed is the vibratory or vibration of sound -

Lesions of the External Ear, in Wounds stretch entirely through the
the substance - and not only through the thin skin only, and very usefull
in collecting sounds or air for vibrations - And for sympathy - (Look
at Mr Swarts paper) - The Meatus Auditorius liable to many
disease and the first is, it being clouded by a false membrane, if it
be external may be cut away &c - if maybe at the very bottom near
the tympani - or Dr W^c C^L thinks it to be a thickening of the Membr
brani tympani - to cut it away is said to be dangerous, when the
Tympani is thickened may be seen opaque in a strong light - a
strong solution Lunar Caustic has been used with advantage by it
eating and thinning it away -

Also a diminution of the size Meatus, even so that a probe cannot,
perhaps be introduced - May depend on a determination of blood to
the head - overcome this and introduce small tents and allow
them to remain, is the only treatment - or even a little Lunar
Caustic diluted - but no very great benefit derived -

But more commonly obstructed by Wax, and causes deafness common
to old people from 60 to 80 years - to be extracted by probes and to be softened
down by injections of warm water and milk - frequently the wax is
in small quantities and not easily discovered, these are difficult to remove
first moisten the part by some Animal Oil not Vegetable Oil to remain
in over night and syringe it out in the morning with soft soap and water
a very small Silver wire to be used as a probe -

To relieve Hemiparesis of the Ear to be treated as Hemiparesis in other parts
Common Sulphur at bed time - warm teas all to produce perspira-
tion - Locally, Solution of Corros Sub goes to and Z - Blue Ointment
best is Nitrate of Silver - Castile Soap a very necessary part of the
treatment - it require constant irritation in the neighborhood -
A suppuration or Ulceration of the Ear very troublesome throughout
life Treat by Abstinence with laxatives, a Seton to the side of
the Neck - foinaceous - then Solution of the Nitrate of Silver.
grv to x to an Ounce and cleanse the ear with - Castile
Castile Soap as a wash -

Dr. W. C. Cullen Dec 27th

Polypus excrescences in the meatus auditorius. follows a discharge of the ear - kept an issue by ~~applying~~ lunar caustic

Disorders of the Tympanum and cells Mastoidei - or middle ear - otitis media is the inflammation of the lining membrane of the Eustachian tube - And may obliterate in the obstruction of the passage to the throat - Cupping - Bleeding, leeches & low diet - Blisters and embrocations do harm - From neglect you a collection of matter of a purulent kind - producing Stenofaction because it cannot pass to the throat - (Scummers on the ear) to be evacuated immediately not to be left to nature - Sometimes the bones will decay and be thrown off - to prevent this evacuate it by making an incision in the membrane of Tympanum, first ~~matter~~ cleansing the ear by a syringe and taking out the hair, and then inserting the ear and the rays of the sun into the ear - or introduce a polished probe, then pressure at the inferior portion - then subdue inflammation, apply over the ear a roasted Onion, purgative, antiphlogistic - if a Blister at the back of the neck - but a seton on the back of the neck is the very best of all remedies - (Am. Infus of Argemone Nitrate for the great pector of those you cannot cure - Do not always terminate in suppuration - Sometimes the Eustachian tubes are closed - & the often take place from diseases of the throat - as the size of the aperture is either closed or pressed upon - occasionally the middle ear is ^{entirely} cut off from the external ear atmosphere and here nothing will be of use but an operation which is seldom successful - The operation of trephining the mastoid portion of the temporal bone - and exposing the middle ear to the external air - Or introduce a probe through the nose but of very little use or none at all -

Disorders of the Labyrinth of ear - pyralis of the side of the, ringing sounds - but these are incurable - Or there may be a disease of the nerve auditorium - tonics as Iron, bark, blisters, Moxa & friction with salt, Zuckerkand

tonsils themselves, — but often in ~~surrounding~~ ~~circumstances~~ ~~situation~~
Treatment, active depletion, ven to four, blisters and quaring do
harm; — gangles often do injury, — if any is used cold water only —
when you wish to evacuate, the pus do not cut through the half arch
of the palate — they ought to be generally laid open but be careful
in your examination and operations —

Sometimes there is a Chronic Inflammation, caused by concretions
and pieces of food, lodged in the saddle-like holes of the glands
being compared to a pepper-box — then to be taken out by a probe

Ulcers — from scrofulous, Lippulitis, bad state of the stomach &c
Correcting them compose the Treatment —

Cancerous — Tonsil slightly enlarged, livid or Lead like colour
extending down the throat, stiffness, shooting pains and varicose
veins of the Mucous Membrane — Nothing done by an Opera-
tion but, palliate with Milk diet, weak solution of Corrosive Sub- 3 grs
to an 3 of water for a week — Cicuta never cured —

Tonsils enlarged in Scrofulous in children; known by snoring very
much at night, no pain unless inflammation is present, not an
operation unless it is too large, or you have failed in overcoming
the scrofulous affection — if you operate, do it with the hook
and knife and clip off a portion of it and let the cheese
like substance pass out — in these operation pass the finger down
and cause gagging

Enlarged Tonsils from frequently repeated inflammations, and
sore throat — ^{much redness, pain &c} rarely to be cut out as hemorrhage will ensue
but Iron wire and double canula better than the silver wire, frequent-
ly to tighten it — or it being pinched tightly several hours, and may some-
times be taken off — it will generally pass off in 24 hours — is very painful —
There is an enlargement from the use of Mercury because the
Mercury was of no use, not being a very true case of
really venereal disease — extracted by the wire — as above — the last —

Saturday Dec 31

Ulcers of the Antrum Hyemorianum &c

Tumors under the tongue, owing to the obstruction of the holes -
lancing not sufficient or even probing - but cure the
tumor with a hook and cut off as much as you can with
a pair of scissors which the very best remedy - Setons &c
of little use as it will return - Generally in children
the tumors often extend more below the chin than in the
mouth - but do not lance it under the chin as it will leave
a fistulous opening, be careful always to make the opening
in the mouth - Called, Ramula - (or Soft Cancer)

Salivary Fistula, of the Parotid duct - Setons from the ex-
ternal orifice by a thread obliquely through into the
mouth - this very difficult to cure, if this cannot be done you
must destroy the functions of the Glands by pressure &c
Enlarged Sub Lingual Glands under tongue often
interrupt articulation &c -

Monday Janry 2^d 1826

Osteo Sarca, fleshy tumors growing from the bones or the
bone being converted into a fleshy tumor, of two kinds
One of the lining Membrane the other of the Periosteum
it is generally found to be a Medullary tumor or a Soft Cancer
formed in the fibrous Membrane, it will always ~~and~~ originate
without inflammation there being no fluctuation; there is per-
haps a constitutional disposition to this Soft Cancer and
all parts of the Body is liable to it, And in operating for
tumors we should be careful whether it is of this kind or
not - The Eye chiefly the seat of this disease, and
success more likely to follow the extirpation than when
in any other situation, to be distinguished from Carsi-
noma as they are ~~so~~ much alike, at first looks like
Cataract - afterwards a dark tumor arises contain-
ing a cheese like substance

Dr McEllan Tuesday Janry 3^d 1826

Scirrho cancer, common to the ^{and this the only part of the face} flower lip, and the female breast in the lip he first feels a lump or scab which he often picks off - after some time he feels a lancinating pain shooting and ulcerating pains external and internal - there are sometimes two or three tumors and an Icterus matter passes through an opening or bare deformed excrescences, inverted edges - small sinuses - it may under the angle of the lower jaw - seldom happen in any other situations than those mentioned - sometimes the edges everted at others inverted - the Penis, the or Uteri sometimes affected - the discharge never purulent but serous with little blood. Smell very offensive small watery Icterus discharge - Sometimes in discharges of the ^{pus} may be discharged - the internal part when cut open appears to be divided ^{by} ^{petitions} known by the name of roots, at least so called ^{by} the vulgar - the glands in the neighborhood secondarily ^{become} irritated or inflamed - and a here ^{we} may apprehend great danger from an operation unless you remove the glands, that is, the disease likely to return -

There many affections of the face, supposed to be cancerous but may have a suspicious appears but never result in true cancer unless the it be in the lower lip - sometimes extends like Phage - denie ulcer &c but there are not Cancerous - sometimes you a number of bluish spots which ulcerate and discharge then heal up, then thought to be cancerous, happens on any part of the body - " - but there are not cancerous -

The Scirrhous and Medullary Cancer, of the female breast - the true cancer never occur until after about 35 years of age, many tumors do occur before this some also require to be extracted for safety &c there are a great variety of tumors at all ages these to be looked too, but not cancerous -

They sometimes ulcerate and subside by supuration —
May be owing to some disease of the general system or leucemia
Treatment, alterative, laxatives, &c, no purpose unless you wish
to remove the breast by this plan — no irritating or stimulating
applications to the part — but perhaps Lead water &c
Avoid every thing that may possibly prove injurious &c
If you cannot remove it any other way operate by taking
out the diseased tumor only — Cut down to the tumor apply
a hook and you will easily get it out &c — but
first give all the remedies a fair trial —

True Cancer, ^{of the breast} require different treatment, the constitution will
be emaciated and hollow — the breast hard, retracted and sunk —
Glands in the axilla enlarged — and always occurs in the decline
of life — first cut away, away the hair of the axilla — then cut
from the lower portion obliquely to the axilla, then one above
to correspond with the one below — then expose the pectoralis
major and remove the enlarged glands ^{with the finger} and burrow under
the gland and it is easily removed &c
To dress apply suture, strips & bandage & scarcely any blood vessels re-
quired to be tied unless profuse bleeding — then a ligature with
a half knot — and soon to be taken off — the arm to be
bound tight to the body — the patient to lie on the opposite
side or back &c

Thursday Jan 5

A Great ^{number} of Medullary and Scirrhus tumor, but all of the same
one or the other of these two kinds and no other &c — but are
specific

Operation for Cancer of the lip — wounds heal dif-
ferently in different countries as in Egypt they heal
much sooner — if the system is able to bear
the operation and surgeon can remove all the
disease — he then is justifiable in performing
the operation — & but where there is danger
of death from other causes, never perform the
operation &c

Make a V like incision and dissect it down and extract the tumor and much of the parts as may be required & Carry the incision down to the angle of the jaw &c And dress it with the interrupted or twisted Suture &c - If necessary a portion of the lower jaw may be removed.

Friday 6th Janry -

In extracting the lower jaw - the Carotid artery is not to be tied previous to operating as recommended by some Surgeons &c.

Hare Lip; sometimes the jaw is divided more or less in one or two fissure - the button of bone to be pushed back to a level with the other teeth, the edges to be pared away by a pair of Sissors, but not too obtuse above, to be carried up into the nose so that they may be drawn together with more neatness &c. Use the hare lip pins the needles to be extracted in 4 or 8 hours or may be 3 hours the needles before inserted before inserting them - threads of the Suture to be left &c -

Or perhaps best to use the interrupted Suture inside the lip and adhesive plaster on the outside, instead of the twisted Suture formerly recommended &c -

Saturday

Carcinoma of the eye; or Cancer of two kinds, ^{or Melanoma or true Cancer} all to be treated in the same way, sometimes passes into the nose and other parts - the operations are all uncertain, little to be judged from an external examination, as sometimes the external parts are little affected and the internal parts may be very much affected, - to extract the eye - introduce the bistoury at the internal canthus and divide the nerves and and muscles here, then by one incision above and one below and the eye is out - then introduce a ^{small piece} sponge and pass the lid over it and it will stop the hemorrhage, and as the sponge is sent out, and the parts will be filled up by granulations

Bronchotomy - Laryngotomy &c -

To relieve those ~~as~~ who are choking from foreign bodies in the glottis and suspending respiration - or tumours in these parts causing the same obstruction or in spasmodic contraction from different causes - also from Inflammations as Croup &c - (Croup of a true kind occurs only in children) Cynanche Laryngeas, also require it - (this occurs in adults) Also may operate for Resuscitation - but first close the nose and press upon the Pomum Adami, and a pair of bellows introduced into the mouth and you may inflate the lungs this way - if this cannot succeed you may then perform the operation - - Where the parts are too much swollen do not perform the operation - but introduce Catheter - Operation to be performed between the thyroid and Cricoid Cartilages - Make a straight incision through the skin, and then dissect carefully down to the Crico-thyroid Cartilage - then a transverse or straight incision through the ^{Ligament} Cartilage straight when you wish to remove any foreign body - but ~~you~~ if you wish to relieve then the transverse incision as then the tube will be easier introduced - Some say Hook of wire (of suspender spring wire) instead of the tube, these best for children - Laryngotomy ought to be preferred &c

Monday Jan'y 9th 1826 -

Introducing tubes in the Larynx through the nose pull out the tongue pull the head forward, the tube being curved but it is a difficult operation - Most frequently the foreign body is lodged in the Pharynx - very often may be taken out by the fingers of the operator in examining the part this should always be attempted before a probang is introduced, if you can only feel it with the end of the finger use a pair of forceps

Dr

McBlellan

Off - however you do not succeed in this way you must throw the head back and introduce the probang, but this only when it is low down and after you have tried the effect of a pretty powerful emetic as this has often succeeded &c -

Introduction of a large catheter into the stomach to remove poisonous liquors or contents; The head to be thrown as far back as possible and the tube to be thrust down in a straight line aided by the finger, and then thrown in warm water or water and milk. And then turn the patient over on the abdomen and the contents will be thrown out without any other effort - if not to be thrown out by the syringe - we may tickle the fauces and this may often succeed beyond all our expectations, this to be done before you introduce the stomach catheter.

Yesterday January 16th

Tumors - ^{fatty or} Steatomatous - Scirrhus, and Incised

The Steatomatous or fatty tumors, immediately under the skin, irresistible to touch, of a fatty feel - we must operate when they are so large as to become inconvenient and can only be removed an operation, the whole part to be removed and not allow any part to remain or it will return, the incision to be oblique divide the integuments down to the tumour and use no other instruments than a scalpel and your fingers.

Cancerous, ^{like scirrhus cancer} difficult to decide from an enlarged gland of the Lymphatics - known by the peculiar inflammation of the periastrum on the top of the sternum (like the common nodes)

Incised tumors - When they come to prove an inconvenience in the neck after ~~the~~ ^{being} confirmed with bronchocele.

Perhaps there are several links (of an interesting nature)

Wednesday Aug 10th

Aneurism from many different causes as violence or a disease of the interior of the artery and these generally occur in the male between 35 to 50 years of age - first from dilatation of the artery and more likely to be in the aorta - if very large you find a tumour of a pulsatory and will protrude near the sternum or between the ribs or they are absorbed by pressure - the ~~coat~~ ^{by coagulating blood} parts between the cavity and the external parts are very much thickened.

(A very interesting subject at present) bleed, rest - low diet &c. do all that can be done (in less an operation) - but ^{blood} never coagulate in mere dilatation of the artery, most generally however the internal and middle coat rupture - known, by a thrilling or aneurismal pulse also strong and hard - then also common to dilations of heart &c. - Great by - bleed every 3 or 4 days in small quantities from 6 to 10 $\frac{3}{4}$ - low diet of a thin vegetable & watery - laxatives nearly daily - rest absolute by sitting or lying down - this treatment to be continued a long time at a month or two or 4 or 5 months - and then gradually allow him to return to his former habits. -

Thursday Aug 12th

When the tumours extend ^{the artery or appears membrane} ~~over the tumour~~ the aneurism bursts by ^{thoroughly} ~~bursting~~ if pressure could be applied it could be of no use, but apply it over the artery between the tumour and the heart, sometimes there will be no pulsation owing to the granulations - An operation, only an assistance to the remedies already mentioned - if it is performed better wait a while before it is performed - if the tumour becomes indolent it does not require an operation.

Aneurism of the Carotid Artery - The artery near the sternum mastoid - the Omo Hyoides crosses the artery - and here the incision is to be made and the ligature to be passed around by

a probe or needle the artery not be incised by passing handle of the knife under it.

Innominate — just above the Sternum — deep seated &c —

Thursday & Friday

Of Aneurism of different other parts &c —

Monday Janry

Aneurisms from wounds of the ~~occident~~ arteries from accident — require to be cut down to the artery & apply a ligature above and below the tumour, the Arteries will be found healthy and blood thrown into the cellular substance which forms the sac — More danger of mortification in operation of this kind of Operations than in Cases of true Aneurisms because here the collateral branches are ready to convey the blood — You must therefore endeavour to keep up the circulation through the limb as much as possible — Aneurisms formed sometimes from fractures of the limb or strains &c and require to be cut down to and examined &c —

Amputations — of the Metatarsals of the Toes — which various causes will occasionally demand as tumors — necrosis &c of the parts the Metatarsal bone and Phalanges are to be taken away two in incisions one above and one below carried back to an acute angle disarticulate the joint and may be easily then ^{be} separated by the knife after this apply adhesive strips &c Arteries to be tied &c as may be required — no deformity but a narrowing of the foot &c —

Of the foot - the cure very much expedited by dissecting
up a flap of skin and a cushion of muscles. - the cir-
cular incision entirely around the limb (or the old plan)
is the best - the bone to be taken off below the
insertion of the ligaments of the patella. The tibia and
Fibula to be divided exactly of the same length - the
arteries then to be secured - no cellular substance, veins
nerves to be included in the ligature which is always
the cause of so much pain and trouble - the soft
parts brought together from side to side, leaving the liga-
tures out at the lower end of the Orifice - narrow strips
short - and light dressings, no tow - narrow strips
are no tourniquet but use a silk handkerchief &c -

Of the thigh for making the lateral flap - make an incision
from the top of the bone to the bottom - one on each side
of the bone, the incision slanting downwards is the
best - &c - of the circumstances which require an Op-
eration different questions arise - first - Is an operation
to be performed? - 2nd How? and is the whole limb
to be taken off or only the affected part? -

Amputation occasionally, required for - Specific tumors - Phage-
denic Ulcers - Compound Fractures and especially Com-
pound Dislocations -

Dr Monday Mc Clellan
Jan'y 23rd 1826

Hernia, endangering the delay - Every part of the Contents
of the abdomen may protrude in different regions -

Umbilical Hernia of the Infante and that of Adults &c

Infante always a swelling in the Centre of the Umbilical Chord

Some say always present in the Fetus in Utero - frequently seen
at birth the Omentum ~~is not~~ villas and is not protruded

but different in adults where the omentum - besides it is
not exactly in the Umbilical but in the Linea alba and

the figure will be ^{be} Oval - but in the Fetus it is ~~an~~ Circular

One, and in adults the Omentum always present or per-

haps may be of a fatty kind known to the French - no

difficulty in reducing an Infante Hernia seldom requiring an

operation - but in

Adults there will be colics - indigestion and other trouble

Some symptoms from projections of the Omentum also

there are leg bones where there fatty tumors are present as

these are connected with the Omentum - these last

more common to old corpulent persons - May happen

to spare persons - the Omentum may generally be reduced

by the fingers - but the fatty tumors more difficult to re-

duce it - if it cannot be reduced must be supported by

stays and belts - trusses &c the truss of Dr Hull of

York preferable - but instruments as Truss &c not to be used

unless you have reduced the hernia - but use light pressure

by belts or laces &c and may be absorbed perhaps in this way

Tuesday Janry 24th

An Operation after securing an Infantile Hernia a double armed needle to be passed through the artery and both tied and an adhesion will take place or tie it up like the mouth of a sack. Another way but either of these two modes seldom may be required - both of them may be done as there is no Omentum in the neck. ^{ligature} not so tight as to slough the part but only cause adhesions.

Inguinal Hernia - generally enclosed in within the substance of the spermatic chord - the bands of Muscles called collateral bands of Utricle are the cause of Stricture. - ^{Cumal or} Hernias differ in regard to their contents. Femoral Hernia does not accompany the chord but lies on the thigh emerging ~~thru~~ under Poupart's Ligament.

Inguinal Hernia of different kinds from their state first when in the groin is called ^{Duodenal or} Inguinal - When in the Scrotum called Scrotal Hernia - The Hernia may be strangulated as soon as it passes through the upper ring and will be a small button like tumor has been called Concealed Inguinal Hernia - When there is a great deal of Colic you should always enquire and examine in every case - After a reduction of the Intestine you may have a Typhilitis of the Intestine and Salivation the only Cure - Sometimes they continue the whole length of the Chord and called an Oblique or Indirect Inguinal Hernia. and here it has the spermatic artery behind it - but when it passes down directly, the artery will be behind and in the last does not pass through both rings - but in the other ~~does~~ ^{passes} through both - the direct only through the external

Upturning the fascia Transversalis between the internal
ring and os pubis and then through the external ring
called Centro-Inguinal ring and is the direct Hernia
the natural or oblique ^{or indirect} descent follows the spermatic chord
which passes through both rings and the epigastric
artery will be on the inside of the tumour and be
tween the pubis, not so likely to be stricken
In the direct descent will pass over ^{and before or at the side} the chord and
cremaster and separating as in the indirect -

Inguinal Hernia
The Congenital occurs at birth and passes down into
the Tunica vaginalis Testis which does not entirely ^{round it}
but behind it - the intestine lies before the testis. (of the Tunica)
The adult does not allow this - as the neck become
in contact and close up the aperture by which
the intestine testicle passed in

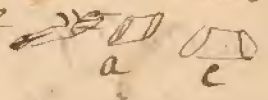
Congenital Inguinal Hernia sometimes the intestine has descend
ed and the testicle has not descended another kind
of hernia and there frequently in after life the testicle
endeavours to pass down and form strangulation.

The Incised Congenital Inguinal Hernia - where the
peritoneum passes ^{into the Tunica vaginalis} down before the ~~down~~ Intestine
and one where the testes has passed down before - and
where it has not passed

Thursday Jan 26th 1825

Contents of these Hernia of have little constricted parts -
pendent of the true Constriction ~~part~~ - May be constricted
at the mouth of ^{the} cavity of the sack either at the neck or low
er down or it may be above the real structure also
and in this way the part of the sack which was at the abdomi-
nal ring and there constricted might return into the ~~slender~~ partly.

Of Femoral or Crural Hernia — which passes out under
 Poupart's Ligament — Sometimes the cellular substance is
 ruptured and then the sac is not so compact with the vessels
 and will ^{not} pass down the thigh — ~~and~~ when the cellular
 substance is ~~not~~ ruptured it lies between the vessels and the
 pubis and might be mistaken for Inguinal Hernia
 But if it is bound down by the fascia of the chord
 it will pass down the thigh — Femoral Hernia
 nearly always happens to the female, but Inguinal to the
 male — As the space under Poupart's Ligament is larger
 in the female on acct. of the formation of the pelvis —
 It may also be distinguished by examination of the parts ~~be~~
 through which ^{Internal Crural ring} ~~Internal Crural ring~~ ^{Inguinal Hernia} ~~Inguinal Hernia~~
 and Internal abdominal ring — And
 they are separated by Poupart's Ligaments — the Anterior
 parts — the Hernia passing out under Poupart's Ligament
 and fascia lata of the thigh has a similar edge
 and is the external ^{crural} ring of Femoral Hernia — the
 outer part of this aperture is filled up by vessels — And
 there is a space ^{or canal} between those two Crural rings And
 all these resemble the ~~Inguinal~~ abdominal rings and
 canal, but the two crural rings are much more ob-
 lique than the abdominal rings & canal



Dr. McEllan

Under the skin the first is a fascia of the abdomen sometimes thicker other times thinner this is not a true fascia but a dense cellular membrane — this covers the Lymphatic glands of the groins — Aneurisms, Boas abscesses, enlarged glands, Hernia, ulcers of the part; may easily be mistaken for each other these to be carefully distinguished — Anatomy of Inguinal Hernia — The fascia of the ext. Ob. form the external abdominal and the chord passes through — When the stricture is at the ~~abdom~~ external ab. ring the bands of Winslow to be recorded — the internal ab. ring under the external ab. muscle also the ~~the~~ internal ob. mus. and Trans. covers the upper part of the ring — the two ring generally the cause of structure but the ^{the lower ends of the two internal} muscles over the rings may assist — the fascia transversalis lines the inside of the Trans. muscle and in this is the internal ring near the spinous process — the Epigastric artery passes through the inner part of the ring and when the Hernia passes through this always carry the artery before it — if the Hernia be complete the stricture will almost always be at the external ring — Hernia of long standing the two rings meet and sometimes quite in contact — In Ventricular Inguinal Hernia the Epigastric artery will be on the ~~inside~~ outside and here the Ventr. muscle may cause the stricture, + Cremaster Mus. is given off from pauparts Ligament and meets the Chord in an angle just as it passes out and in the Oblique Descend the Cremaster Musc. will be before the sack And according to this the Cremaster Mus. will be immediately under the External cellular fascia — the ^{of the Chord} vessels will be on opposite sides of the sack — but will not divide the chord itself or the Cremaster Mus. from the Chord in the Ventro Inguinal Hernia, but the Chord may be before the sack

If any of the large Intestine ^{come down} ~~de~~ the Peritoneum will not show
a Herniary sack, ^{but may be behind the intestine} — but in the small Intestine there will be
a loose sack covering the intestine being the Peritoneum

Treatment ^{for inguinal Hernia} Friday Jan 27 — 1826
where no operation is required — the symptoms
are colic pains indigestion &c — and this will continue
untill it is reduced or prepuce is removed &c — by this the
blood will be congested, this may happen even when there
is no stranguary — or a congestion of the alimentary mass
in the small intestine protruded — the cause is gener-
ally a greater quantity of blood, wind or mass forced into
the sack and not stricture of the rings as generally
thought to be — There is a irreducible Hernia
which is not stranguated but where it cannot be
reduced by the patient or Physician, this will generally
be Cæcum &c but it may easily become stranguated
and very liable to occur from local or generally irritation apt
to occur in the right groin — these may be overcome by
taking away the irritation by blood letting — injections, lax-
atives & rest — An operation for this only palliative
and only allows the Hernia to return — An Intestine
known by the gurgling sound of water &c — If ~~but~~ Omentum
known by the sensations of Acrey and more solid — if the
Bladder be protruded known when the bladder is simpli-
ed — first know the nature of the Hernia and then
will easily know how to reduce it — more easily done
by bolstering up the shoulders and hips — shake the
thigh and the patient to make no exertion whatever —
and slight prepuce and the mode in accordance to
the anatomy of the part — Femoral Hernia also reduc-
ed according to the kind of Hernia, if it rises above pau-

Treatment of Strangulated Hernia

- 1st the Taxis lightly
- 2nd Bleeding while sitting to fainting
- 3rd Laxative Enema
- 4th An Anodyne Injection to the rectum
- 5 Tobacco Injections have been recommended
- 6th Application to the parts

Keeping at the same time the parts bolstered up without any exertions on the part of the patient. Keeping down inflammation by bleeding

downwards then upwards. ^{castor oil} laxatives, blood letting to syncope (fainting) - and this will be productive of sitting - this the best of all that can be done until irritations of the time apply give Nausea - And apply cold wet cloths to the parts - or put the patient in a relaxed posture. If the strangulation must be attended to done and irritations may be induced. Opium may be given when fear affects the patient. Tobacco has been used as an irritant to the rectum but is apt to produce too great may produce it may be of great use if all this not succeed then do not wait longer than at the commencement of the strangulation of the Hernia some Mechanic

Cal apparatus to be applied as a compress & bandage or Truss (see Hull) the best - the fore pad of the Truss to be so placed as to cover both rings and the abdominal canal some soft old linen to be placed between the pad & skin to absorb the perspiration - all unnatural adhesions of the intestines to be separated - also if two or more different substances lay down in the sack should adhere to each other they are carefully to be separated before it is returned.

pro
du
in
oper
day
the

If any of the large Intestine ^{come down} No. the Peritonium will not show
a Herniary sack, ^{but may be behind the} — but
a loose sack covering the

Treatment, ^{for Original Hernia} when not op

are colic pains indige
untill it is reduced or
blood will be congested
is no stranguary — or a
in the small intestine
ally a greater quantity of
the sack and not str
thought to be — The
which is not strangua
reduced by the patient
be Cæcum &c but
and very liable to occur
to occur in the right gro
taking away the irritati
atives & rest — An
and only allow the Her
known by the gurgling &
known by the sensations

Bladder be protruded known when the bladder is simpli
ed — first know the nature of the Hernia and then
will easily know how to reduce it — more easily done
by bolstering up the shoulders and hips — shake the
thigh and the patient to make no exertion whatever —
and slight pressure and the mode in accordance to
the anatomy of the part — Femoral Hernia also reduc
ed according to the kind of Hernia, if it rises above pa

Sam Schrack
apt
by
up, lax
liative
testine
omentum
the

parts ligament, prepare first downwards then upwards -
if this will not do - depend on ^{castor oil} laxatives, blood letting to syncope
(Cathartics of an active kind do injury -) - and this will be produ-
ced earlier by the patient standing or sitting - this the best
if the patient can bear it - this the best of all that can
be done - and to be repeated untill irritations of the
parts is taken off - at the same time apply give Nausea
acting dose of Ant. in water - and apply cold wet cloths
to the parts or Emolient fomentations - or put the
patient in a warm bath in a relaxed posture.

If these do not do then the following ^{must be attended to} ~~must be done~~
so often using the taxis is wrong. Mortification may be induced.
If fever or happens sometimes and Opium may be given when fear affects
the patient too much. — Tobacco has been used as an

injection or by smoke thrown up the rectum - but is apt to
produce prostration and should it be too great may pro-
duce death - externally applied it may be of great use
in Urinary diseases — should all this not succeed then
operate immediately at least do not wait longer than a
day two or three at most after the commencement of the
strangury. — After reducing the Hernia home. Mechanic

cal apparatus to be applied as a compress & bandage or Truss
(see Hull) the best — the fore pad of the Truss to be so
placed as to cover both rings and the abdominal canal
some soft old linen to be placed between the pad & skin to
absorb the perspiration — all unnatural adhesions of the
intestines to be separated — also if two or more different
substances nap down in the sack should adhere to each other
they are carefully to be separated before it is returned.

Saturday Janry 28th 1826

The Operation for Lithotomy - the Lateral operation, as now
practiced here - the staff large - Knife instead of the Gorge -

Monday Janry 30th

The operation not so successful as might be wished for
As one of 4 or 5 generally dies taking it in general -

Different periods of life has great effect in the success of the
operation, for instance, more successful in youth or childhood,
as then the incision will not be required to be so deep or large.
More dangerous in after life than in the prime, as there
in the decline the glands will enlarge with many other cir-
cumstances -

Mode of operation has a great effect on the success - also
the ~~total~~ situation and relative magnitude of the parts - as
if the bladder is empty there will be no lower fungus - or
also if the rectum is full it may be cut - if the
bladder is distended by urine it will generally will be
a more successful operation than not being so much
danger - Also the sacra or suspensory ligament
will be affected by the bladder being filled or empty - the
vesicle artery & veins pass through the constriction of this
sacra when it meets over the bladder and there is a dan-
ger of wounding these vessels and probably this may
be the cause of the sudden death from the operation as they
are of the varicose and consequently the flow of blood is very
great and all pressure is taken off the heart - & to
prevent this the staff must not be too much curved -
the manner of conducting the Gorge to be attended too be a scal-
pel on a straight director the best - N.B. The muscle of the levator
ani cover the prostate gland and some of the fibers to be cut
in particular if not attended too the forceps cannot be introduced

Dr. McCallum

Monday Janry 30th 1826

The Sansonian Operation

By Cutting immediately downwards to

the rectum on the staff; immediately between vesicular ducts
but now is not much attended —

It has also been proposed to cut immediately upwards.
No danger of cutting the vesicular ducts &c but not
much attended to, being modifications of the low operation.

The High Operation; first named by Franco — formerly attributed
to Cheselden notwithstanding — they that is double pre-
vented the discharge of the urine for 24 hours by which the
Peritoneum was carried up and allowed room for the
the incision — but then the urine will pass into the
cavity of the abdomen will ulcerate the parts and often
prove fatal — Cheselden evacuated the urine and distended
the bladder by barley water by this the danger greatly obviated
— but here the coats of the bladder was paralysed by the great distention
causing great difficulty and by the operation irritation ulceration
suppuration sinuses followed — but he at last followed the low operation
for reasons not known —

The High Operation as now Practised, is perhaps the best — and dif-
fers in this, that the bladder is emptied by an artificial
opening into the membranous portion of the Urethra, that this
was practised by Fagracome — but this not required — then intro-
duce a ^{containing a stilet} canula & he pushed the bladder up and of the peri-
toneum with it and then extend the incision and take
out the stone — and generally is attended by considerable
success — and recommended by Dr McCallum — without
two opening and without the canula containing a knife —
See 3rd page next

Monday Feb. 13th

The Symptoms of Calculi — All the symptoms of Calculi may occur without any Calculi to be found —

The symptoms — are indigestion, flatulency, acidity of the stomach the perspiration much deranged — and the derangement of the urinary organs. a smarting at the glands penis. and the patient will pull at the prepuce and some say this is a sure sign of stone — or smarting or bloody urine also said a sure criterion — All these however are not certain — there is also a sudden stopping of the urine and even this might be fallacious, it might be closed by the 3rd lobe of the Prostrate gland or by a sudden spasm of the muscles of the Urethra — An irritable condition of the rectum is also characteristic of this disease — pains shooting up in the side and abdomen all are as frequently present when there is no as when there is — being caused by a functional derangement of the nervous and other systems or a derangement of the bladder or Urethra owing to an affection of the ~~bladder~~ stomach —

If from an irritability of the Urethra from gonorrhea — the same remedies for stricture of the canal and treated by occasionally introducing a Bogue or introduce a strong injection of Lunar Caustic gr x to ʒj of water — Avoiding all stimulating diet and drinks — free exercise — &c
When it depends on derangement of the alimentary canal of 2 kinds One where the urine is loaded and at the same time it is very offensive ^{& sour} — the other is red and not so offensive — the first to be treated by Mineral Acids after cleansing the canal — The latter form to be treated on opposite plan — at the same time very low ~~and~~ diet & occasionally bitter — The first by Nitric Acid ʒss - Gum arab. Sugar - and ʒviij of water to be continued after there is relief to the disease

at the same time alteratives — The first condition
is called The Lithic Acid state and the other
the alkaline — In the first the disease com-
mences in the kidneys — The ^{or Phosphate} ~~alkaline~~ diathesis
the lining membrane of the urinary organs —
The stones are also ~~of~~ to these two kinds, but
all connected with a derangement of Chylopoetic
viscera — Tuesday Feby 14

The foregoing symptoms, are often the precursors of a
Calculus in the bladder and may last a number of years and
they may even sometimes be removed by attention to diet &c
~~often~~ however none of their irritability of bladder will be
formed and the Calculi will form imperceptible —
and will always be of one of the two foregoing kinds —

The alkalescent kind the most difficult to treat by far —

The local Affections of the Urethra & Lithic Acid, easier
there being 3 kinds as just above —

^{mimosis} ~~Idy~~ hæmorrhoids — very difficult to cure when the patient shall
suppose he is affected with Calculi, and they will deceive their
physician — this general and constitutional disease is a
singular one — sometimes in one place then in another — The
will eat well sleep well, but always complaining of something.
alterative and change of Situation &c — (See Marshall
Hall) — sometimes chronic & acute — the Urine is pale, is
not caused by derangement of the stomach — &c the
skin altered and blotched &c —

Wednesday Feby 15

The Introduction of the Catheter — required for ~~an~~ over retention
of the Urine — the only difficulty will be in the Perineum
which will be spasm of the muscles of the part — use no force,
untill you relieve the spasm by other means — as blood letting
till slight fainting — ~~then~~ ^{involunt} injections & laxatives next as Castor Oil — warm
bath the best — and there will generally succeed — if these fail however then

give Opium ij to v grs with as much Calomel the quan-
tity of Opium to be large — The Ext of Belladonna
prepared by some if it is good might be useful in 3 to 5 grs
with Calomel — if you give too much you salivate —
Last of all is Tobacco leaf Zij to 1 pint an Zj injected
occasionally — This retention caused by Injuries of the
Spine but seldom require to severe remedies — And is a
Pyralisis of the bladder — Occasionally you will not
require any instruments — Silver Catheter generally the
best in these cases. but always have several different kinds
of instruments and of different shapes — Large instruments
pass easier than small ones —

High operation of Dr Mclellan no instruments, but a scalpel
forceps, forefinger — Catheter, a thread of silk in a bowl of water
below — in females a female catheter, these to remain after
the operation for some time, and is very ~~at~~ analogous to
Taking up the Iliac Artery — As now practiced — 1st Make
an incision precisely in the direction of the fibres of the Ex-
ternal oblique either higher or lower, above the Ant. spi-
nous process of the Ilaum — after dividing the fibres —
and those of the other muscles and expose the Peritone-
um — ~~at~~ then use the finger only and push up the
Peritoneum — And the artery will be seen — After you
can apply the ligature by the Needle & forceps of Dr
Physick — Do not touch the artery with the finger or the
handle of the knife or you must apply two ligatures
and divide the artery nor pull the artery when you
tie — the ligature passes out below the peritoneum

Dr. W. C. Cullen
Thursday Feb 16

[1926 Feb. 16?]

Retention of the Urine by Spasmodic Stricture of the Urethra,
Caused by Tumors in the Rectum - gonorrhoea &c

Real Stricture or Permanent Stricture - does not entirely prevent
the flow of urine and may be always partially thrown out only
when there shall be a spasmodic action and this spasm
requires the alleviating measure - the other or former
requires radical plan -

Palliatives - are such as shall divert away the blood from the
parts by blood letting, laxatives, clothing, diet, send your pa-
tient to warm climate in winter as all change of
weather affect this disease more than any other - such
medicine and diet as cause a watery urine as the vegetable
diet - always deny all shortness, fasting, hot bread &c and
even by these means you may expect much -

Small doses of Magn: a teaspoonful 3 times a day,
next the alkalis even lime water - (then however when
the Phosphatic diathesis is not present) - all these
used at the same time not too much exercise especially
in summer - To these you may give Carol tea - parsley
- tea &c as adjuvant to cause a watery flow of urine -

If the Phosphatic diathesis is present - Use the Mineral
Acids - Mineral Tinct of Iron - Barks &c might be given
bath the parts as rising - Shower bath - After these use
The Radical Remedies - excite an absorption of the mucous efflu-
ed in the Urethra - sometimes you have a bridge across
the canal or sometimes you have warty tumors in
different parts - and these will require cutting or burning -

A stricture at the ~~the~~ very anterior extremity of the glands penis - requires to be cut by a straight pointed bistury -

The most frequent situation of a stricture is at the very seat of gonorrhoea viz about an inch back from the glands penis - And requires a Catheter to be introduced every day or two and no particular kind of instrument, to be used - It is at the bulb and at the membranous portion of the urethra that requires a great care in the selection of the kind of the ^{bogies} Catheter - These supposed by Dr Mc Clellan to be less frequent than generally by some practitioners think you may find an obstruction frequently and always attend to diet, laxatives &c for some time before decide on a stricture being there - especially if ^{you} have already passed a stricture, and in these cases it might be spasmodic occasionally - Wax bogies or flexible Catheters here after prove useless - ~~that~~ you may do more harm with a metallic tube if ~~you~~ do not understand the anatomy of the parts, ~~well~~ the gum elastic Catheters are always to be kept bent - the Wax bogies will shew you the size and situation of the stricture - Oils to lubricate the Bogie should be ~~Animal~~ as Lard &c - Do not use too small metallic instruments as they will bend too much - the moment all irritation from the introduction of one ~~to~~ bogie is the proper time for the introduction of another time - these with diet &c - will generally be sufficient - although in some cases the patient will complain much from the first few introductions -

It sometimes happens however, ^{that} ~~the~~ ~~most~~ ~~not~~ (as some say) that we must use a ~~cat~~ canula containing a knife, this may sometimes do, but generally ended - or to introduce a catheter and allow it to remain several days at ~~at~~ a times confining them at the same time bed and the others requisite mentioned before - the caustic only good for destroying the morbid irritability and use the lunar caustic is ^{10 to 40 grs to 3i} ~~jection~~ but never use it to burn out the stricture as practiced by some - not much advantage from blisters &c Cold & warm bathings might be off use, used according circumstances.

Retention of Urine in Old persons is generally caused by a disease of the prostate gland and they will prevent the entrance of the Bogie & Catheter - the enlargement of the 3rd lobe is generally the cause - the ~~external~~ instrument ~~can~~ only be introduced by bending it very much and pass over it - sometimes one or other of the lateral glands and then the instruments to bent accordingly - Friday Feby 17th

Diseases of the Testicle - are first a venicose enlargement of the spermatic veins - producing tumors in the posterior portion of the testicle also rising higher up - giving some dull pain for hours - owing to too great quantity of blood in the part ^{and is always} in the left side - is very common. Only wash ^{cold water} the part every morning ^{or oftener} support the parts by bags or tight drawers - a very simple disease feels like a mass of worms - and you may see the Blue vein. Ailed silk lining the drawers or bag any good - Camphorated Spts don't drink much wine nor don't eat much.

The next in frequency is enlargement from an injury -

Deplete - leech - purgatives of Hyalazoge kind - keep him on his back &c - camphorated oil &c - Scrofulous enlargements and ulcerations require nothing but the plan of treatment for Scrof.

Chronic Tumors - an different situation but all of no dangerous kind - only are a trifle wash &c never result in harm - order Diet - Blue pill, Sassailla - fiction - surp - ension - a bag of light &c is generally sufficient

Next Hernia Humeralis -
If that which arises from Gonorrhea - to be treated as if it had arose from any other cause - If the pain be very severe - Bleed - leech - laxatives - low diet, patient on his back - a large Emollient poultice the very best. Sometimes they will return again & again then smear the testicle ^{with} Mercurial Oint: Camph: Rochers powder 6 to 10 grs with 3 or 4 grs Calomel at night - Sometimes the Epididymus will always remain larger than common -

Sarco Cele - require a regular course of bleeding and always attend to the connection between the Uterus & Peritonium - as smearing the legs with Mercurial Ointment

Cancerous - Induritic or an Increase of a sarcomatous tumor are always to be cut off as it may be of a malignant nature These two specific diseases are the only ones that demand ^{extirpation}!

Hydro-cel - of common Anasarca Hydro-cel - and is only in the skin - ~~for~~ easily managed if not connected with common dropsy nature generally cures it shower bath & tonics may assist - diuretics purgatives &c

Genuine Hydrocele - is in the cavity of Tunica vaginalis there are various ~~th~~ as there are several sorts sometimes connected and all these must be opened and they are called Circumscissa Hydrocele - make an incision and expect loins water and allow it to remain sometimes then take it out this will only answer for pure simple Hydrocele

Dr Mclellan

For if there be Hydatids or a number of Sacks require a large opening — but only tapping with a lancet sometimes produce great inflammation consequently the above plan will be hazardous — The best is by making an incision and introducing a bogie or passing a seton through the scrotum — Instead of this Dr Mclellan introduced a piece of linen rag and allowed it to remain - drawing it out gradually. The seton is perhaps the best - introducing it at the lower part and carry it out at the upper part & tie together the two ends of the strings - this may be passed through all the Sack - & And use Bandages —
Friday Febry 17th

Tapping the bladder - when it cannot be done by the Method it is to be done below and above as recommended for Lithotomy. When the third lobe is enormously enlarged, I would prefer the bladder above the pubis and introduce a trochar and wore in for two or 3 days and then introduce a short canula.

Performing it, through the rectum is more difficult

Diseases of the Rectum — Hemorrhoidal of 2 kinds Vascular & Muscular — The former caused by Costiveness &c And the last not from the same cause —

Treatment - in the Vascular by laxatives, diet low, Cold ablution several times a day is the very best —

The Muscular tumors sometimes become very large even that they cannot be reduced into the rectum — they must be extirpated by ligatures or by the knife and not often much hemorrhage left simple than gradually suppurated, so they are to be drawn out and then to be cut off

A frequent disease is the rectum becoming dilated and the upper part falls down into it - and the stools will be long and difficult and all the sensations of stricture will be felt - the only cure is laxatives diet - laxatives, as Sulphur &c - and above all the hourly use of injections of Cold water or other cold -

There may be a scirrhus of the rectum in old age causing strictures & requires laxatives - Rye mush & molasses, stewed prunes - if Cancerous, cicuta injections and an introduction of a bougie -

^{by} Fistula in Ano - and abscess probably always caused by many or all of the diseases just before mentioned - And Fistulas are of a great variety and no treatment will be of use, unless you first remove the cause - as strictures in the anus be a fish bone or any foreign body might pass out and cause the disease - or it may be caused by an affection of the constitution and inflammation extending and causing the disease -

We have abscesses of this kind from debauched constitution or from that state of the constitution which cause or have Phthisis, Asthma, gout, Rheumatism. When some say we ought not to operate under such circumstances and again recommend operating under every circumstance or constitutional disease. - This subject is involved in great difficulty -

If however the fistula cause irritation or any thing else disagreeable then cure it and form an issue in some place if required -

Still if it be Chronic and there be a tendency to Phthisis &c - and the fistula is not inconvenient then do not operate for the disease act as an issue ^{also caused by} Phlegmonous Erysipelas ~~could~~ ^{and} ~~may~~ ^{be} better be left alone -

different varieties of Fistula as where there is no ^{face} external opening Called Blind Fistula - And here ~~they~~ will extrude in the loose Cellular substance causing great pain, a horrid consequence may be fallacy (as related) if not timely opened - You may find the fluctuation in the abscess before any opening is formed then open and you cure the disease -

Where the opening is external, and may maybe cured if the opening be freely opened in time and will not require the operation for fistula - Still however we have often abscesses extending high up and is called an incomplete fistula - they are very difficult to cure and require a full operation and here the Sharpe pointed bistoury must be used - after the operation put a small quantity of dry lint between the lips repeated every day.

Superficial Fistula often extend to Vesicula Seminalis and cause such great desire for a venereal appetite only to be relieved by an operation for the fistula -

The patient should live on a low diet altogether on the disease always will return -

Saturday Feby 18th

Abscess often or at least may happen in the cavity of the Rectum and the bladder will appear floating in the Pus of the abscess this sometimes breaks in the abdomen corroding the Peritoneum and intestines - Also Purulent abscess often happen in the abdomen

Monday Feby 20th

Nephritic Inflammation - M. plethoric bleed - hip bath - Opium - injection - enema - mild laxatives - ʒpt Turpentine 8 gtt
Rc

Sole cases of the Eye — Foreign bodies in the eye — ^{if the day is dark and the body is near the pupil you cannot see it.} to be removed (if they be steel, Flint &c) by producing a contraction of the pupil & keep the other eye open and look obliquely and you will see it lying in a little pit and then remove it by a large curved needle with the side of the needle — if however it pass in sweet you must introduce the point of the instrument in under the foreign body and can then easily remove it — you must therefore distinguish the manner the foreign body is inserted — and then act as above — If you do not extract it — do not bleed & give laxatives &c as recommended as it will exasperate inflammation — but treat it with the pith of Sassafras — Whether you extract or no keep the eye cool from light and the use of the pith of Sassafras —

Small hairs, growing into the eye produce frequently the inflammations of the eye, and these you may relieve by extracting these hairs — generally found on the internal Canthus of the eye —

Watery Excrepences — ^{in the parts,} produce great irritation, these to be cut out and touched with lunar Caustic, Also Watery Excrepence do not allow the lunar caustic over the whole eye, and then use the pith of Sassafras before closing the eye —

Thickening of the Caruncula Lacrimalis — or the parts having hairs growing out — and keep up inflammation — Laxatives, removing the hairs if this does not do remove a part of the Caruncula —

Lippitudo or destruction of the root of the eye lashes — do not use any wharves — anlip Milk & water — depend upon Blue pill every night And a detour in the back of the neck — And always attend to this?

Obstructions of the Lacrimal duct — or tumors of the parts, the parts to be cut open — and introduce the point of lunar Caustic, or cut it out entirely if you do it on the external surface, sometimes they will go away by laxatives or sedative powder & vegetable diet — or Champhorated ointment — or use dried gall bladder diluted with vinegar to the consistence of ^{mucilage} ~~vinegar~~ every night as going to bed — River use leeches on the eye lids only leech the temples —

Obstructions of the Lacrimal duct — leech — blister, blood-letting Sulf Lime go to 31 water — laxatives — Alteratives — Pain in the eye from reading depend on — alteratives — changes of habit — depend not on local applica

Dr. McCallan.
Monday Feb 20th

There are Inflammation of the external part of the conjunctiva
Infants of these often happen a few days or weeks after birth - and then
is very similar to gonorrhoeal inflammation, and there might be
contracted by passing through the pelvis - And do arise from
females having Gonorrhoea or Fluor albus - this disease
will suppurate & are very severe - are to be treated alike.
never apply leeches or lead water - but apply stimulants as
Linct. of Camphor not to be allowed to pass between the lids - also
fomenting the eyes three or four times a half an hour with
milk & water then apply the Camphor at the same
time the ~~fto~~ following may be used with advantage -

grj Sulp Zinc grj Lead, water Rose Zij - Also Sulphate
of Copper grs to Zj water - solution of lunar caustic sufficient
to change the colour of the water & may be strengthened - these
also good for the effoliating process of the conjunctiva from Gonor-
rhea matter being carried to the eye; and here the lunar caustic
the only remedy - in Children give Mag: - blisters on the neck or
temple - this disease in suppuration will lay open the Cornea
and an opacity will follow - Lead water will always produce
an opacity as the lead is decomposed -

Contagious Ophthalmitis - common and often found in the makers
It is suppurative & a peculiar disposition to form watery excres-
cences on the eye or the lining of the lids - And the disease is kept
up by warts which are to be cut off and are lunar caustic - by
working with a camel hair pencil it produces inflammation and pro-
duces a new action - also setons - if inflammation run too
high use cold applications

Scrofulous Ophthalmia - the most frequent of all diseases of the eye
you will find other symptoms present of Scrofula - Abdomen tumid
stools black - the eye will be very irritable and not relieved by cold
diet &c - you will see small pimples and ulcers on the conjun-
tiva - sometimes the ulcers are very deep - To treat by Alterative
and purgative and this the only plan

Blue Pill or Corrosive ^{Sub} on the alternative
Luna & Manna the best —

the Sarsaparilla after 2 or 3 weeks — given in Tea —

Friction with the ~~dry~~ towel and salt — every morning —
farinaceous diet —

If this do not do use next the seton —

Emetics occasionally Speake or Ant:

Watery solution of Opium 8 or 10 grs to ℥ss — Copper Zinck
best with of Sassafras — (next Lunar Caustic to the silver)

If the discharges or protrudes do not get or push it back — but
apply the pitch of Sassafras and apply Lunar Caustic every day and
thoroughly destroy — Use belladonna to keep open the corner —

Tuesday Feby 21st

Genial Inflammation or pain from sewing or reading being
an irritability are to be treated by change of air & altera-
tives &c diet — Antiphlogistic and genual plans now
used by bleeding &c Warm bath —

When bloughing and pain come on suddenly and they
lose their sight immediately — depends on an in-
flammation ~~not~~ within the eye and no relief exter-
nally — Blood letting to the greatest extent — Antiphlo-
gistic — cupping &c as before — local application
to either cold or warm — as comfort shall be given.
~~the~~ pledges of linen in water renewed as often as
they are dry — to be placed over all the surrounding
parts — poultices never to remain on too long

McCallan Feb 21st

The alum cure poultice only when there is a relaxed state of the conjunctiva — It may do good in serofulac and Edematous Inflammation to remove them for a night then use Stimulants - as Camphor.

Inflammation of the ball and deep seated - Which does not affect the external parts sometimes from cold collected Rheumatic ~~the~~ Aphthamia - connected with Rheumatism in other parts and the general symptoms of Rheumatism as the tongue white fur on mouth - stomach & bowels regular - pulse irritated - hard tense, no luminous &c — the appearance of the eye itself will assist you - the inflammation confined to the Sclerotica Iris & lens - the pupil immovable - the vessel of the Sclerotica run in straight lines and not wormlike as in other parts of the conjunctiva - these vessels run to and in the cornea itself - It terminates in adhesive inflammation of the Iris - you will see small particles of pus - the pupil has attracted adhesion and cannot be dilated - sometimes extends to the Choroid coat - retina &c

Treated as Rheumatism by bleeding largely and rapidly leech the temple - then evacuate the bowels - Blister's fomentation warm applications - endeavour to determine to the skin as in Rheumatism - then Opium - the vinous Colchicum 50 grs with magnesia is the very best remedy, several times a day - and will always relieve general Rheumatism of the joints

Ophthalmia of the Venereal Disease - as of the Scally,
Phagadenia &c - is very similar to the former
Ophthalmia - not certain whether from the disease or from
the remedies - It occurs where no Mercury has
been used - A disease similar to this from long
Mercurial Course - and probably contracted from
cold - but these cannot be treated as the Inflammatory
kind as bleeding & evacuations as they always do
harm - The best plan is to place the patient
under the rapid use of Mercury - with ~~the~~ Bell
and then are the two great remedies - And every thing
else is only assistance - if from bleed - &c -
Emaciating remedies always assist the effects of Mercurials
very much - give Calomel with Antimony and
you may do it in several days - ℞ Cal: gr iij. Ant-
Powder gr iij every 4 hours -
- Cup the temples - Letons behind the neck &c
you will generally remove the disease in 4 or 5 weeks.
Continue the Stramonium for several months

Opacities of the Cornea - Caused by various causes - Common to
old persons from no cause whatever - to be treated according
to the Cause - It has ~~been~~ happened in young persons from
no cause whatever where it takes on an apoplectic action -
There is another where it is caused by Ulceration and may be
removed although you cannot remove the Cicatrix - which
in a majority of cases happen - Sometimes a cataract
or Halo happen from inflammation or injuries &c
The Treatment - by such means as will effect an absorption
of the opacity - if it has been of short duration you may
still have greater hope - if it has been of long stand-
ing you can have but little hope or none at all

it
You may try if ^{it} have existed several months or even two
years &c — You will remove this deposition of lymph
by stimulants &c as some say) (diminishing the circulation
as many surgeons do by bleeding cupping purging
setons ~~or~~ and have all done good) the best is to move
in the intermediate or any one as maybe required —
for instance is there be much redness and the vessels are
large respect the first plan, but act be the second
plan even to divide the vessels — Draw blood to
diminish the vis a tergo — Blister, leech, setons on
the back of the neck — this do for a month or two
then divide the vessels — first elevated a portion of the
conjunctiva by a small hook and cut it all off
by the scissors — do not cut down by a knife as some
do — as you will only partially divide the vessel — but
you may run the knife under the vessel and cut
a large orifice so that you do not have an exposure.
The scarification knife may be of use to scarify on the
inside of the lid — Alteratives — low diet & purging
bleeding &c — Particularly alteratives if there be scroph-
ulous — The Opacity originates sometimes
is kept up by the Iris adhering to the Cornea, and
then cut off the supply of blood by introducing a curved
needle — this circumstance not at all attended by
physicians generally — always take care to establish
the healthy functions of the skin —
Where there is no surrounding vascularity but opacity
then stimulants slight elevation — friction — change
of diet — jenever &c — also ~~purge~~ the astringents may
do good locally none are specific — Sulf Zinc grj
to ʒi water corrosive sub. gr ʒ/4 or less &c

If the eyes are agglutinated in the morning use lemon
Oint: Zi Lard Zi to anoint the eye on going to bed.
And an Astringent in the day.

Tranquium - a membranous growth or fungous growth, may
at the inner ^{canthus} margin of the eye caused by the pressure
of the two lids on the eye - and a vascularitis or irrita-
tion of this is the disease - hook it up and cut it
away and you have a cure with Antiphlogistic and col-
liriaters - If it be a true Tranquium where the vessels
are running together without this map then cut them
out by a hook and knife or by a cataract knife -
but do not cut away too much of the substance. or
cut the *canoncula lacrymalis* &c -

Operation for Making the Artificial Pupil - ~~are~~ there
are three different kinds, - first where there is
a small pupil - introduce a small knife
(as recommended by Cheselden) through behind the Cornea

2nd the operation of Scarpa - the iris is torn of and pushed
away -

3 - Introduce a hook ~~and~~ through the Cornea and hook up
the Iris and cut it off And allow the the remainder to
retract - the operation of Wenage &c -

Which of these operations to be performed -

If the crystalline lens are sound do not interfere
with the lens - do not do it by Cheselden - and this
only in cataract -

If the interior of the eye is sound then the last
operation for an opacity of the cornea,

Dr McWilliam

Tuesday Feby 21st

Here the patient will only see obliquely, you may and may ~~or~~ relieve ~~of~~ by Stramonium—

But the best of all is an operation especially when a part of small part shall happen in the center of the Cornea—also from wounds—the pupil will dilate and the Iris will be sound—there may be at the same an opacity of the lens—

Make a puncture near the edge of the Cornea by a knife sufficient to introduce your hook into the pupil through the Anterior Chamber—then pull the hook out and Iris with it and cut it off by a pair of curved scissors—And push the rest back—this is the last operation—

The operation of Scarpa—All the Cornea but a ^{small portion of} margin of it is left opaque—introduce the needle behind the Iris and ~~a~~ ^{tear} ~~large~~ it away—perhaps even here the 3rd operation is the best—and is a dangerous operation. And the disease will return—or perhaps even total blindness might follow—

Thursday Feby 23rd

Dilatation of the Pupil of which the best of is—with a cornea knife—about a margin of the Iris obliquely through the Cornea make a puncture large enough to carry a hook through avoid the hook touching the Cornea and lens—seize the margin of the Iris and draw it out a small fold of it—and cut out as much as may be required, then there will be no danger of ~~it~~ it closing again by inflammation.

Scarpa's operation does more violence to the eye and apt not to be successful — it is done by tearing away the Iris from the ciliary — only where, the whole of the Cornea is opaque but a small portion of the margin only remaining, is this to be done —

To remove an opaque large Cornea — from great inflammation — Introduce a Cornea knife in the Cornea — then with hook shake the Cornea — then with a knife cut it off and ^{you} may do it without injuring the eye — and is the easiest way of performing the operation —

Cataract — of different kind — As couching — by introducing a needle behind the pupille and sink the lens — Hard lenses cannot be operated on in this, but in all cases it is a bad plan —

Extraction — ^{called division} not to be pursued in all cases, best in Hard cataract such as happens in old persons —

Introduce a knife in the cornea and cut it half through in the form of a flap and to be carried by a hook and moved in different directions, will ~~not~~ do only ^{for a hard cataract as it is so deep} —

Adams divides the lens in halves and then divided and broken in fragments and thrown into the anterior Chamber of the eye — Can only be performed where the Cataract is soft — is the most difficult —

This is the operation for a soft or membranous cataract — and then use the double edged knife for soft cataract — a needle for a membranous cataract; this operation called Division —

Dr. M^r William Febry 23rd

^{callosa lacerating}
Alexander, in the Posterior & Anterior - passed through the
Cornea, not at the edge for fear of the ~~thin~~ Cornea Iris, And
is carried through the pupil, And you desire to ad-
mit the lens to the vitreous humor - And the
lens will be wasted away.

Posterior more dangerous and inflammation more likely
to follow -

Friday Febry 24th

Of different Cataract - and the operations adapted to the
different kinds - " - Cataract differ on account of the cause,
that produce them. And the age of the individuals -
In youth they are soft - in old age hard -

Recent Cataract from wounds often more benignant -

The Chronic or slow kind in old age it will be hard.
And here the crystalline lens is the seat of the disease
especially if he see better in a dark day &c -

Of this kind happen to children we know them to be
soft - there are better principles than even
the appearances of the eye themselves -

The Membranous Cataract - is situated in the anterior
portion of the capsule of the lens - and in this situation
most of the diseases of the eye happen especially if the
patient be not in the decline of life - caused from
wounds - ulcers on the Cornea, or small pox - or from causes
that cannot be explained - there may be an effusion and
still the lens are not all diseased, here you will see sil-
very whitish spots,

Besides the Lively, there are some muddy — and here the lens may or may not be affected — but those from Wound & Scrophula, the lens will be soft or entirely opaque, disorganized and absorbed — Called lenticular Cataract — From Wounds the Posterior Chamber advances to the lens and into the Anterior — We have also the Membranous Cataract in the form of Conjunctival Cataract are Scrophulous — always operate immediately and do not leave the patient to grow up. as the capsules will become cloudy &c — We sometimes have found this kind of Cataract to come on in a large age as at 10 to 20 or more those connected with Scrophulous diathesis — (Common to cook over a hot fire a long time — a Sea Captain who looks a long time through a telescope or Smiths &c often has something of this kind or hard eye) Then we prefer Saucer's operation or you might extract — And is called the Soft Cataract and is intermediate between the hard and the membranous Cataract — You may know if the lens is present by it ~~being~~ the Iris being convex &c — All these things to be attended

The Hard or Organized Cataract — Peculiar to old subjects beyond 40 or 50 years of age — They come on without any disease or cause and cannot be checked by any means we know of — Sometimes becomes ossified — We seldom have any other disease with it — No treatment will be of any use — Unless indicated by some peculiarity or pain heat &c in the neighbourhood.

Do not operate until the cataract is complete

The capsule is perfect - but is to be cut frequently - if not the threads of capsules remaining will become opaque and then they must be drawn away - after however they will be of an ash colour -

Of capsular cataract or the posterior capsules opaque cataract - can be seen easily behind the crystalline lens far back - An is very thin - you must only expect to see a dark hazy appearance far back -

It is generally in combination with Amaurosis - therefore the prospect of relief from an operation is rare - notwithstanding you destroy the posterior capsule - And by the operation you mostly will destroy the lens - best cut away all the posterior lens - and anterior also and at the same time destroy the lens - Always begin first & carefully - boldly - & steadily and use Saundersen curved needle.

Saturday Feb. -

Amaurosis - of two kinds, Functional And Organic

Functional - where there is a great congestion of blood to the neighboring parts - known by heat of the forehead, flushed countenance &c and may be cured by antiphlogistic - cupping - general bleeding - seton in the back of the neck, low diet &c also alteratives

Crigenic Anamiasis - Can never or seldom ever be
Cured, it generally occurs in Old persons, and it
seems useless to attempt any remedy - Alteratives
And a variety of other plans have proven un-
availing, But we are not entirely to despair
as we have known Cures from this form
of the disease &c